

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT
1. Susan M Fafard	<i>Susan M Fafard</i>	Street: 4694 Leta Way City: Verona Zip: 53593	<input checked="" type="checkbox"/> Town Middleton <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
2. Sally J Cohen	<i>Sally J Cohen</i>	Street: 4723 Sheboygan Ave City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village Madison <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
3. Terry Kindsey	<i>Terry Kindsey</i>	Street: Adrian T.L. 118 Breese Terr City: Madison Zip: 53726	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
4. Debra Greane	<i>Debra Greane</i>	Street: 5009 Knox Ln. City: Madison WI. Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email dsgreane Phone (608) 2
5. Kathryn Wolf	<i>Kathryn Wolf</i>	Street: 4931 Hickory Trail City: Middleton Zip: 53562	<input checked="" type="checkbox"/> Town Springfield <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
6. NANCY L. FIELDER	<i>Nancy L. Fielder</i>	Street: 2161 Springdale Center Road City: Verona WI Zip: 53593	<input checked="" type="checkbox"/> Town Springdale <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
7. Thomas Harpt	<i>Thomas Harpt</i>	Street: 2817 Maple View Pr. City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email easy pair Phone (608) 8
8. Linda Goldfarb	<i>Linda Goldfarb</i>	Street: 9 Coronado CT City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)	Email Phone ()
9. Rebecca Paradiso de Sany	<i>Rebecca Paradiso de Sany</i>	Street: 6111 White Pine Way City: Fitchburg, WI Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)	Email Phone ()
10. Justin Wilder	<i>Justin Wilder</i>	Street: 1212 Sweeney Dr #1 City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)	Email J. Wilder Phone (608) 5

Certification of Circulator

I, Nancy A. Dodge, (certify): I reside at 3134 Oxford Rd Madison WI 53705 Village of Shorewood Hills
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Nancy A. Dodge
(Signature of Circulator)

Page No. (Official Use Only)
1351

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PO Box
Madison

Phone (608)
Email na

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return to
Committee
PO Box 2
Madison,

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1. Jeannette White		Street: 756 Clarkson Rd City: Mosheim WI Zip: 53559	<input checked="" type="checkbox"/> Town York <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
2. Jean McOtis		Street: 226 Belle Ave City: Belleville, WI Zip: 53508	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Belleville <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
3. Jay Mulder		Street: 5005 Sherwood Rd City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email jaymulder Phone (608) 661
4. Katy Brunette		Street: 8540 Greenway Blvd #114 City: Middleton, WI Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)	Email Phone ()
5. Victoria Jones		Street: 606 Charles Ln City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
6. BARRY E. GIDAL		Street: 2953 Ivanhoe Glen City: MADISON WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FITCHBURG	11/15/2011 (Month) (Day) (Year)	Email Phone (608) 274
7. Nancy Gidal		Street: 2953 Ivanhoe Glen City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)	Email Phone ()
8. Jeff Seltz		Street: 4582 Bishop Ct City: Middleton WI Zip: 53562	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Westport <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone ()
9. Margaret A. Lindsey		Street: 118 Breese Ter. B City: Madison Zip: 53726	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
10. CHARLES H. FAFARD		Street: 7694 Leta Way City: Verona Zip: 53593	<input checked="" type="checkbox"/> Town of <input type="checkbox"/> Village <input type="checkbox"/> City MIDDLETON	11/15/2011 (Month) (Day) (Year)	Email Phone ()

Certification of Circulator

I, Nancy A. Dodge, (certify): I reside at 3134 Oxford Rd, Madison WI 53705 Village of Shorewood Hills
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator's Municipality)

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11 / 15 / 2011
(Month) (Day) (Year)

(Signature of Circulator)

Page No. (Official Use Only)
1352

Circulators, please include
Phone (608)
Email nadodge

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SCOTT WALKER RECALL PETITION

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1. Alice Erickson	<i>Alice Erickson</i>	Street: 5109 Spring Ct City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. REGINALD DUANE LAWSON	<i>Reginald Duane Lawson</i>	Street: 6416 OFFSHORE DR. 53705 City: Madison Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
3. ROSEMARY LAWSON	<i>Rosemary Lawson</i>	Street: 6416 OFFSHORE DR City: MADISON, WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
4. Marisa Koeller	<i>Marisa Koeller</i>	Street: 1114 N. High Point Rd. #207 City: Madison, WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
5. Mary Sella	<i>Mary Sella</i>	Street: 2206 Chamberlain Ave City: Madison Zip: 53726	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. MARY Jo GALE	<i>Mary Jo Gale</i>	Street: 353 Concord Dr City: Oregon Zip: 53575	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Oregon <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
7. Marian E. Maglio	<i>Marian E. Maglio</i>	Street: 906 Hillside Way City: Verona Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Verona	11/15/2011 (Month) (Day) (Year)
8. Amy E. Wiberley-Bradford	<i>Amy E. Wiberley-Bradford</i>	Street: 9 Shefford Circle City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. Scott Diener	<i>Scott Diener</i>	Street: 6902 Schroeder Rd #20 City: MADISON WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
10. Erik Weinstein	<i>Erik Weinstein</i>	Street: 425 Bayhill Dr City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Nancy A Dodge, (certify): I reside at 3134 Oxford Rd Madison WI 53705 Village of Shorewood Hills
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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Nancy A Dodge
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by
Committee
PO Box 250
Madison, WI

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
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1. Print: <u>Vicki M. Johnson</u> Sign: <u>Vicki M. Johnson</u>	Street: <u>2 Sundown Court, Apt. A</u> City: <u>Madison</u> Zip: <u>53704</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
2. Print: <u>Jon E. Anderson</u> Sign: <u>[Signature]</u>	Street: <u>6329 Inner Drive</u> City: <u>Madison</u> Zip: <u>53705</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
3. Print: <u>Sandra Grote</u> Sign: <u>Sandra Grote</u>	Street: <u>S4706 Konkel Mill Rd</u> City: <u>Baraboo</u> Zip: <u>53913</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Greenfield</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone <u>608-</u> ()
4. Print: <u>P. Dymen Moss</u> Sign: <u>P. Dymen Moss</u>	Street: <u>2 Highgate Circle</u> City: <u>Madison WI</u> Zip: <u>53717</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone <u>(608)</u>
5. Print: <u>Judith D. Will</u> Sign: <u>Judith D. Will</u>	Street: <u>5801 Gemini Dr. #315</u> City: <u>Madison</u> Zip: <u>53718</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone <u>608</u>

Certification of Circulator

I, Margie E. Moses, (certify) I reside at 525 Santa Segoe Rd.
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number)

City of Madison, WI
(Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

[Signature]
(Signature of Circulator)

Page No. (Official Use Only)
1394

Circulators.
Please include your c

Phone
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Email
margie.moses

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by J
Committee
PO Box 256
Madison, W

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1. Print: <u>NANCY HOMES</u> Sign: <u>Nancy Homes</u>	Street: <u>2 BRADFORD LANE</u> City: <u>MADISON</u> Zip: <u>53714</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>MADISON</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
2. Print: <u>Jessica L. Schlumpf</u> Sign: <u>Jessica L. Schlumpf</u>	Street: <u>W6797 State Rd. 39</u> City: <u>Blanchardville</u> Zip: <u>53516</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Green County</u> <u>YORK</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
3. Print: <u>Nicole Nelson</u> Sign: <u>Nicole Nelson</u>	Street: <u>5976 Schroeder Rd., Apt. G</u> City: <u>Madison</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
4. Print: <u>RON KINOS</u> Sign: <u>Ron Kinos</u>	Street: <u>6902 RESTON HEIGHTS DR.</u> City: <u>MADISON</u> Zip: <u>53718</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>MADISON</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
5. Print: <u>Susan K. Cooper</u> Sign: <u>Susan K. Cooper</u>	Street: <u>638 Eugenia Ave.</u> City: <u>Madison</u> Zip: <u>53705</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()

Certification of Circulator

I, Margit E Moses, (certify) I reside at 525 South Segoe Rd
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number)

City of Madison, WI
(Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Margit E Moses
(Signature of Circulator)

Page No. (Official Use Only)
1355

Circulators,
Please include your c

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SCOTT WALKER RECALL PETITION

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1. Print: <u>Charlyn M. Pozza</u> Sign: <u>Charlyn M. Pozza</u>	Street: <u>2851 North 77th Street</u> City: <u>Milwaukee, WI.</u> Zip: <u>53222</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Milwaukee</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email (Phone (
2. Print: <u>Jill Hewitt</u> Sign: <u>Jill Hewitt</u>	Street: <u>4904 W. Woodlawn Ct</u> City: <u>Milw.</u> Zip: <u>53208</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Milwaukee</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email (Phone (
3. Print: <u>Gloria Garrett</u> Sign: <u>Gloria Garrett</u>	Street: <u>6510 N. 68th St</u> City: <u>Milwaukee</u> Zip: <u>53223</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Milwaukee</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email (Phone (
4. Print: <u>Elena Montes</u> Sign: <u>Elena Montes</u>	Street: <u>Energy Drive</u> City: <u>EAST TROY</u> Zip: <u>53120</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>EAST TROY</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email (Phone (
5. Print: <u>LAVERNE LUND</u> Sign: <u>Laverne Lund</u>	Street: <u>3051 N. Murray</u> City: <u>Milwaukee</u> Zip: <u>53211</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Milwaukee</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email (Phone (414

Certification of Circulator

I, Bonnie Vander Meulen, (certify): I reside at 730 Hidden Cove Rd.
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number)

City of Madison
(Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011 Bonnie Vander Meulen
(Month) (Day) (Year) (Signature of Circulator)

Page No. (Official Use Only)
1356

Return by
Committee
PO Box 2
Madison,

Circulators,
Please include your

Phone
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Email

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SCOTT WALKER RECALL PETITION

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1. Print: <u>Emilie Braunel</u> Sign: <u>Emilie Braunel</u>	Street: <u>310 5th Ave. S.</u> City: <u>Hurley</u> Zip: <u>54534</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Hurley</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
2. Print: <u>Veronica Nobles</u> Sign: <u>Veronica Nobles</u>	Street: <u>2464 W. Lloyd St</u> City: <u>Milwaukee</u> Zip: <u>53205</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Milwaukee</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
3. Print: <u>Claudia Wawrzyniak</u> Sign: <u>Claudia Wawrzyniak</u>	Street: <u>6951 N. 98 Street</u> City: <u>Milwaukee</u> Zip: <u>53224</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Milwaukee</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
4. Print: <u>Amy Kowalski</u> Sign: <u>Amy Kowalski</u>	Street: <u>1308 E. Oklahoma Avenue</u> City: <u>Milwaukee</u> Zip: <u>53207</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Milwaukee</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
5. Print: <u>Dare Boling</u> Sign: <u>Dare Boling</u>	Street: <u>3047 N Prospect Ave</u> City: <u>Milwaukee</u> Zip: <u>53211</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Milwaukee</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()

Certification of Circulator

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(Printed Name of Circulator) (Circulator's Residence - Street Name and Number)

City of Madison
(Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011 Bonnie Vander Meulen
(Month) (Day) (Year) (Signature of Circulator)

Page No. (Official Use Only)
1357

Return by
Committee
PO Box 2
Madison,

Circulators,
Please include your

Phone
608
Email

132642

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CO
1. Print: <u>JANIS SERAK</u> Sign: <u>[Signature]</u>	Street: <u>6900 HORIZON DRIVE</u> City: <u>GREENDALE</u> Zip: <u>53129</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>GREENDALE</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email <u>jserak</u> Phone <u>(414)</u>
2. Print: <u>Gina Maria Papascent</u> Sign: <u>[Signature]</u>	Street: <u>1624 S. 30th St</u> City: <u>Monitowoc</u> Zip: <u>54220</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Monitowoc</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email <u>Brian</u> Phone <u>(908)</u>
3. Print: <u>Larry Palubicki</u> Sign: <u>[Signature]</u>	Street: <u>10484 Bocek Lane</u> City: <u>Argonne</u> Zip: <u>54511</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>Crandon</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email <u>lpalub</u> Phone <u>715</u>
4. Print: <u>Dave VanderMeulen</u> Sign: <u>[Signature]</u>	Street: <u>730 Hidden Cave Rd</u> City: <u>Madison</u> Zip: <u>53717</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email <u>[Blank]</u> Phone <u>608</u>
5. Print: <u>Bonnie VanderMeulen</u> Sign: <u>[Signature]</u>	Street: <u>730 Hidden Cave Rd</u> City: <u>Madison</u> Zip: <u>53717</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email <u>warha</u> Phone <u>(608)</u>

Certification of Circulator

I, Bonnie Vander Meulen, (certify): I reside at 730 Hidden Cave Rd.
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number)

City of Madison
(Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011 [Signature]
(Month) (Day) (Year) (Signature of Circulator)

Page No. (Official Use Only)
1358

Return by
Committee
PO Box 2
Madison,

Circulators,
Please include your

Phone
(608)
Email

02-64-3

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by J
Committee
PO Box 256
Madison, W

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT
1. Print: JANET BAILEY Sign: Janet Bailey	Street: 33 Stone Crest Circle City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison (Municipality Name)	11/15/2011 (Month) (Day) (Year)	Email Phone ()
2. Print: MICHAEL BAILEY Sign: Michael Bailey	Street: 33 STONE CREST CIRCLE City: MADISON Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON (Municipality Name)	11/15/2011 (Month) (Day) (Year)	Email Phone ()
3. Print: Kathy Behrend Sign: Kathy Behrend Phil B	Street: 817 Merrill Springs Rd City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON (Municipality Name)	11/15/2011 (Month) (Day) (Year)	Email Phone ()
4. Print: PHIL BEHREND Sign: Phil Behrend	Street: 817 MERRILL SPRINGS RD City: MADISON Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON (Municipality Name)	11/15/2011 (Month) (Day) (Year)	Email Phone ()
5. Print: Sign:	Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City (Municipality Name)	/ /20 (Month) (Day) (Year)	Email Phone ()

Certification of Circulator

I, JANET BAILEY, (certify): I reside at 33 Stone Crest Circle City of Madison
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

Nov 1 15 2011
(Month) (Day) (Year)

Janet Bailey
(Signature of Circulator)

Page No. (Official Use Only)
1359

Circulators,
Please include your con

Phone
(608)
Email

B256

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT INFORMATION
1. PATRICK LARY	<i>[Signature]</i>	Street: 26 Glenside Cir City: MADISON Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
2. Janet Bresnahan	<i>[Signature]</i>	Street: 1017 Moraine View Dr City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
3. Ally Cross	<i>[Signature]</i>	Street: 35 N Park Street City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
4. Lynette Alice Jackson	<i>[Signature]</i>	Street: W6515 Schmiot Rd City: Johnson Creek Zip: 53038	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City M. Fox	11/15/2011 (Month) (Day) (Year)	Email Phone ()
5. Joan Easley	<i>[Signature]</i>	Street: 5671 Hwy 73 City: Marshfield WI Zip: 53559	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Med. a	11/15/2011 (Month) (Day) (Year)	Email Phone ()
6. Olivia Guilford	<i>[Signature]</i>	Street: 639 E Johnson St City: Madison, WI Zip: 53703	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
7. Bruce Leinweber	<i>[Signature]</i>	Street: 905 Merrill Springs Rd City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
8. Hua Ramer	<i>[Signature]</i>	Street: 2838 Richardson St. City: Fitchburg Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)	Email Phone ()
9. William A. Foste	<i>[Signature]</i>	Street: 1640 - D MONROE ST City: MADISON Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)	Email Phone ()
10. Elham B Milan	<i>[Signature]</i>	Street: 301 Glenhistle Ct. City: Madison, WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()

Certification of Circulator

I, SUSAN ADAMS, (certify): I reside at 7209 Harvest Hill Rd City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Susan Adams
(Signature of Circulator)

Page No. (Official Use Only)
1360

Circulators, please

Phone ()

Email ()

X7

B254

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT INFORMATION
1. Brian Parks	<i>[Signature]</i>	Street: 302 Chamberlain Ave City: Madison Zip: 53726	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
2. Mallory BPP	<i>[Signature]</i>	Street: 12 N Butler St Apt 502 City: Madison WI Zip: 53703	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
3. Elizabeth Jensen	<i>[Signature]</i>	Street: 915 W. Johnson City: Madison Zip: 53175	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
4. Brooke Wilde	<i>[Signature]</i>	Street: 821 W. Johnson City: Madison Zip: 53706	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
5. Veronica Craig	<i>[Signature]</i>	Street: 35 N. Park Street City: Madison Zip: 53706	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
6. Janet Dedmon	<i>[Signature]</i>	Street: 435 Dayton City: Madison Zip: 53706	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
7. Kelsey Halbur	<i>[Signature]</i>	Street: 835 W. Dayton City: Madison Zip: 53706	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
8. Esta Pratt-Kiellen	<i>[Signature]</i>	Street: 821 W Johnson City: Madison Zip: 53706	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
9. Cody Houdrek	<i>[Signature]</i>	Street: 1537 W. Dayton St. City: Madison Zip: 53706	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
10. Stephanie Glaser	<i>[Signature]</i>	Street: 835 W Dayton St City: Madison Zip: 53706	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()

Certification of Circulator

I, SUSAN ADAMS, (certify): I reside at 7209 HARVEST Hill Rd. City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Susan Adams
(Signature of Circulator)

Page No. (Official Use Only)
1361

Circulators, please
Phone ()
Email X 716

B25

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT INFORMATION
1. Nate Miller	[Signature]	Street: 420 N Park St. City: Madison Zip: 53706	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
2. Caitlin Flynn	[Signature]	Street: 35 N Park St City: Madison Zip: 53715	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
3. Stephen Gaschignard	[Signature]	Street: 35 N. Park St City: Madison Zip: 53715	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
4. Denali Lukes	[Signature]	Street: 1019 Milton St Apt 3000 City: Madison Zip: 53715	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
5. Hannah Grindle	[Signature]	Street: 35 N Park St City: Madison Zip: 53715	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
6. Scott Inzed	[Signature]	Street: 2110 Kendall Ave #3 City: MADISON WI Zip: 53720	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
7. Charlie Giese	[Signature]	Street: 625 S. Spooner St Apt. 1 City: madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
8. Dana Marnue	[Signature]	Street: 835 W. Dayton St City: Madison Zip: 53706	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
9. Megan Zanillo	[Signature]	Street: 835 W. Dayton St City: Madison Zip: 53706	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()
10. Susan Adams	[Signature]	Street: 7209 Harvest Hill Rd. City: Madison Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone ()

Certification of Circulator

I, SUSAN ADAMS, (certify): I reside at 7209 Harvest Hill Rd City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 15 2011
(Month) (Day) (Year)

[Signature]
(Signature of Circulator)

Page No. (Official Use Only)
1362

Return
Com
PO B
Mad

Circulators, please

Phone (608)
Email X 716

B250

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by Jan

Committee to
PO Box 2569
Madison, WI

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT
1. Print: <u>Patricia Kandziora</u> Sign: <u>Patricia Kandziora</u>	Street: <u>705 Baltzell St.</u> City: <u>Madison</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone () ()
2. Print: <u>Gayle Love</u> Sign: <u>Gayle Love</u>	Street: <u>7496 Old Sauk</u> City: <u>Madison</u> Zip: <u>53717</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone () ()
3. Print: <u>William B. Love</u> Sign: <u>William B. Love</u>	Street: <u>7496 Old Sauk Road</u> City: <u>Madison</u> Zip: <u>53717</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone () ()
4. Print: <u>MELINDA H. WILKINSON</u> Sign: <u>Melinda H. Wilkinson</u>	Street: <u>713 CHAPMAN ST.</u> City: <u>MADISON</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>MADISON</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone () ()
5. Print: <u>Gail A. O'Neal</u> Sign: <u>Gail A. O'Neal</u>	Street: <u>733 Baltzell Street</u> City: <u>Madison</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone () ()

I, Gail A. O'Neal (certify): I reside at 733 Baltzell Street City of Madison
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Gail A. O'Neal
(Signature of Circulator)

Page No. (Official Use Only)
1363

Circulators,
Please include your contact information

Phone
(608) :
Email
bgoneal@

Batch
B656

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by Jan

Committee to
PO Box 2569
Madison, WI

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT
1. Print: <u>Mary K McCanna</u> Sign: <u>Mary K McCanna</u>	Street: <u>1011 Oak Way</u> City: <u>Madison</u> Zip: <u>WI 53705</u>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <u>Sharewood Hills</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
2. Print: <u>Timothy Wadlington</u> Sign: <u>Tim Wadlington</u>	Street: <u>2134 Kendall Ave</u> City: <u>Madison</u> Zip: <u>53726</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
3. Print: <u>Brenda Hamel</u> Sign: <u>Brenda Hamel</u>	Street: <u>9290 Turkey Rd</u> City: <u>Black Earth, WI</u> Zip: <u>53515</u>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <u>of Berry</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
4. Print: <u>ROSIE WETSCH</u> Sign: <u>Rosie Wetsch</u>	Street: <u>705 Baltzell St</u> City: <u>Madison</u> Zip: <u>53711</u>	<input checked="" type="checkbox"/> Town (RW) <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>MADISON</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
5. Print: <u>Connie Witt Anderson</u> Sign: <u>Connie Witt Anderson</u>	Street: <u>714 Baltzell St</u> City: <u>Madison</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()

I, Gail A. O'Neal (certify): I reside at 733 Baltzell Street Madison
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number) (Circulator Municipality)

Circulators,
Please include your contact

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Gail A. O'Neal
(Signature of Circulator)

Page No. (Official Use Only)
1364

Phone
(608) 2
Email
gjonat

5/5 B
Batch # 06

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by Jan

Committee to
PO Box 2569
Madison, WI

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT
1. Print: <u>Bonnie Jevne</u> Sign: <u>Bonnie Jevne</u>	Street: <u>729 Baltzell St.</u> City: <u>Madison</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
2. Print: <u>Lynne Dennis</u> Sign: <u>Lynne Dennis</u>	Street: <u>658 Pickford St</u> City: <u>Madison WI</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
3. Print: <u>Daniel Kahrs</u> Sign: <u>Dal Kahrs</u>	Street: <u>715 Baltzell St</u> City: <u>Madison</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>MADISON</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
4. Print: <u>Gil Jevne</u> Sign: <u>Gil Jevne</u>	Street: <u>729 Baltzell St.</u> City: <u>Madison</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()
5. Print: <u>William H. O'Neal</u> Sign: <u>William M. O'Neal</u>	Street: <u>733 Baltzell St</u> City: <u>Madison, WI</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email Phone ()

I, Gail A. O'Neal, (certify): I reside at 1733 Baltzell Street Madison
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Gail A. O'Neal
(Signature of Circulator)

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Circulators.
Please include your contact

Phone
(608)
Email
bgoneal7
Baltzell # 8656

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. KAY HONG	<i>Kay Hong</i>	Street: 709 Gilman Street City: MADISON WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Lisa Chen	<i>Lisa Chen</i>	Street: 701 Baltzell St City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. Desmond Chen	<i>Desmond Chen</i>	Street: 701 Baltzell St City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. David O'Neal	<i>David O'Neal</i>	Street: 733 Baltzell St City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
5.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
6.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
7.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
8.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
9.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
10.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)

Certification of Circulator

I, Gail A. O'Neal, (certify): I reside at 733 Baltzell Street Madison,
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Gail A. O'Neal
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Jane Grogan	Jane Grogan	Street: 4810 Odana Rd City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Kristine Patterson	Kristine Patterson	Street: 3984 SHAWN Trl City: Middleton Zip: 53562	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
3. Carol Briscoe	Carol Briscoe	Street: 6 Oak Grove Dr. City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. MARC WEINBERGER	Marc Weinberger	Street: 5222 SOUTH HILL DR City: MADISON Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
5. Rebecca Vander Zanden	Rebecca Vander Zanden	Street: 2409 Whitlock Rd City: Madison WI Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. Mark Stransky	Mark Stransky	Street: 3902 Winnemac Ave City: MADISON, WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
7. David L. Nelson	David L. Nelson	Street: 1034 Waban Hill City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
8. Brook C. Soltvedt	Brook C. Soltvedt	Street: 1034 Waban Hill City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. Joan B. Peterson	Joan B. Peterson	Street: 2018 Chamberlain Ave City: Madison WI Zip: 53726	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
10. Junelle Steward	Junelle Steward	Street: 105 Dorn St City: Wausaukee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wausaukee	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Brook C. Soltvedt

(Name of Circulator)

, (certify): I reside at 1034 Waban Hill

(Circulator's Residence - Street name and Number)

City of Madison WI

(Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Brook C. Soltvedt
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. John E. Siewert Jr.		Street: 1204 Reming Way #208 City: Madison, WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
2. Sarah Bloy		Street: 5529 Dahlen Dr City: Madison WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. STEVEN BLOY		Street: 5529 DAHLEN DR City: MADISON Zip: WI	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
4. ROBERT STEINBERG		Street: 346 GLACIER RIDGE TRL City: VERONA Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City VERONA	11/15/2011 (Month) (Day) (Year)
5. James E. Powers		Street: 1118 S. Whitney Way City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. JOHN W. SCHETTLE		Street: 327 S. Watertown St. City: Waupun, Zip: 53963	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Waupun	11/15/2011 (Month) (Day) (Year)
7. Tyrel S. Rouse		Street: 234 234 Randolph Dr. #114 City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
8. Jacqueline Beecher		Street: 5214 Raymond Rd City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. Leslie Beecher		Street: 5214 Raymond Rd City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
10. Mary Washburn		Street: 7344 Old Sauk City: MADISON Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Cassandra Hoeh, (certify): I reside at 15 N HANCOCK ST L2 City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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(Month) (Day) (Year)

Cassandra Hoeh
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. HELEN BRAUSEN	H Brausen	Street: 7820 Clinton St City: Morrisonville Zip: 53571	<input checked="" type="checkbox"/> Town of Windsor <input checked="" type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email: Helen Phone: (608)
2. Timothy Van Deelen	[Signature]	Street: 506 Cheyenne Pass City: Wauwaukee, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email: [Signature] Phone: (608)
3. MARK VIKSSO	Mark Vikso	Street: 207 SHORT ST City: WAUNAKEE WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village WAUNAKEE <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email: Mark Phone: (608)
4. Dave Dexter	Dave Dexter	Street: 301 Knightsbridge Apt. 5 City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email: Dave Phone: (608)
5. Matthew Hart	[Signature]	Street: 1621 W Pleasant ST #5 City: Portage Zip: 53901	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Portage	11/15/2011 (Month) (Day) (Year)	Email: Matthew Phone: (608)
6. RORY RYNNING	[Signature]	Street: 7165 Bellefontaine AVE #1201 City: Madison Zip: 53712	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)	Email: Rory Phone: (970)
7. Donald Holmen	Donald Holmen	Street: 614 5th ST City: Wauwaukee, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email: Donald Phone: ()
8. Josh Marty	[Signature]	Street: 216 W Main St City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email: Josh Phone: ()
9. Diana Long	Diana C. Long	Street: 508 4th ST City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email: Diana Phone: (608)
10. Michael Alvin	Michael Alvin	Street: 1016 Pasadena PKY City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email: Michael Phone: (608)

Certification of Circulator

I, Laurene Bach, (certify): I reside at 1502 Weyford Dr Wauwaukee
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

Laurene Bach
(Signature of Circulator)

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1269

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT INFORMATION
1. Mary E. McIlwae	<i>Mary E. McIlwae</i>	Street: 512 Rupert Rd City: Wauwatosa Zip: 53597	<input checked="" type="checkbox"/> Town Wauwatosa <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
2. Brandon Stearns	<i>Brandon Stearns</i>	Street: 317 Woodvale Dr. City: DeForest Zip: 53532	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City DeForest.	11/15/2011 (Month) (Day) (Year)	Email Phone
3. Arthur Nicholson	<i>Arthur Nicholson</i>	Street: 310 TOWER TR. City: WAUNAKEE, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village WAUNAKEE <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
4. Erin Macmillan	<i>Erin Macmillan</i>	Street: 1241 Dartmouth Dr City: Wauwatosa Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwatosa <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
5. Philip Autschur	<i>Philip Autschur</i>	Street: 711 UNIVERSITY AVE City: MIDDLETON Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MIDDLETON	11/15/2011 (Month) (Day) (Year)	Email Phone
6. John G. Fabie	<i>John G. Fabie</i>	Street: 25 Village Homes DR City: Wauwatosa Zip: 53597	<input type="checkbox"/> Town <input type="checkbox"/> Village Wauwatosa <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
7. Monica Affenroth	<i>Monica Affenroth</i>	Street: 5963 Chenequa Valley Pass City: Wauwatosa Zip: 53597	<input checked="" type="checkbox"/> Town Westport <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
8. Brittany Byrnes	<i>Brittany Byrnes</i>	Street: 409 5th St. City: Wauwatosa Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village WAUNAKEE <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
9. Connie Clifton	<i>Connie Clifton</i>	Street: 310 South St City: WAUNAKEE Zip: 53597	<input type="checkbox"/> Town <input type="checkbox"/> Village Wauwatosa <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
10. Henry Whyte	<i>Henry Whyte</i>	Street: PO Box 246 City: Wauwatosa WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwatosa <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone

Certification of Circulator

I, Ronald Wolfe, (certify): I reside at 5601 Dehmen Dr Town of Springfield
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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Ronald Wolfe
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Karen L. Niesen	<i>Karen L. Niesen</i>	Street: 1008 Bristol Dr. City: Waukegan WI Zip: 53191	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waukegan <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
2. LUCILLE WARD	<i>Lucille Ward</i>	Street: 210 O'Malley St #201 City: Waukegan, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waukegan <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
3. Cynthia Schaller	<i>Cynthia Schaller</i>	Street: 413 Tiarella Trail City: Cottage Grove WI Zip: 53527	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Cottage Grove <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
4. Casey Williamson	<i>Casey Williamson</i>	Street: 559 Kelly St. City: Sun Prairie WI Zip: 53590	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Sun Prairie <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
5. Bobbie Rettenmund	<i>Bobbie Rettenmund</i>	Street: 205 4th St City: Waukegan WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waukegan <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
6. Barbara A. Daane	<i>Barbara A. Daane</i>	Street: 5071 Vienna Dr City: Waukegan WI Zip: 53597	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village Vienna <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
7. Dymica Waten	<i>Dymica Waten</i>	Street: 155 Tower Dr City: Sun Prairie WI Zip: 53590	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village Sun Prairie <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
8. Michelle Trowbridge	<i>Michelle Trowbridge</i>	Street: 23 Pelican Circle City: Madison WI Zip: 53716	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
9. James Nelesen	<i>James M. Nelesen</i>	Street: 206 West Second Street City: Waukegan WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waukegan <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
10. Julie A. Mansfield	<i>Julie A. Mansfield</i>	Street: 803 N. Madison City: Waukegan WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waukegan <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone

Certification of Circulator

I, Ronald Wolfe, (certify): I reside at 5601 Dahmen Dr town of Springfield

(Name of Circulator)

(Circulator's Residence - Street name and Number)

(Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

Nov 15 2011
(Month) (Day) (Year)

Ronald Wolfe
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT INFORMATION
1. JACK OSTERMAN	[Signature]	Street: 424 CORAL VIEW DR City: WAUNAKEE Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)	Email Phone
2. Sharon Hagerty	[Signature]	Street: 300 S. Franklin St City: Stoughton WI Zip: 53589	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City SToughton	11/15/2011 (Month) (Day) (Year)	Email Phone
3. Linda Truitt	LINDA TRUITT	Street: 200 O'Malley St. #8 City: Waunakee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)	Email Phone
4. C. Holman	[Signature]	Street: 464 Gilbeson Dr City: Waunakee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Westport	11/15/2011 (Month) (Day) (Year)	Email Phone
5. GREG YAHN	[Signature]	Street: 43830 SPENCER HILL City: Boscobel WI Zip: 53560	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City SCOTT	11/15/2011 (Month) (Day) (Year)	Email Phone
6. Jane Yahn	[Signature]	Street: 43830 Spencer Hill Rd City: Boscobel, WI Zip: 53805	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City SCOTT	11/15/2011 (Month) (Day) (Year)	Email Phone
7. Joel McMillan	[Signature]	Street: 1241 Dartmouth Dr City: Waunakee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)	Email Phone
8. Laurel Schultz-Kopff	[Signature]	Street: 10108 County Rd 4 City: Mazomanie WI Zip: 53560	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Mazomanie	11/15/2011 (Month) (Day) (Year)	Email Phone
9. Donald A Kramer	[Signature]	Street: 211 Water St City: Lodi WI Zip: 53555	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Lodi	11/15/2011 (Month) (Day) (Year)	Email Phone
10. Stacy M Kietzer	[Signature]	Street: 200 West 2nd St Apt 2 City: Waunakee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)	Email Phone

Certification of Circulator

I, Ronald Wolfe, (certify): I reside at 5601 Dahmen Dr Town of Springfield
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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SCOTT WALKER RECALL PETITION

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1. Daniel Gosdeck	Daniel Mosdeck	Street: 810 Centennial Pkwy. City: Wauwaukee Zip: 53597	<input checked="" type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)	Email: d d g o s Phone: ()
2. Loretta Holmen	Loretta Holmen	Street: 614 5th St. City: Wauwaukee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()
3. melody manson	melody manson	Street: 102 Kearney Way #107 City: Wauwaukee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/20 (Month) (Day) (Year)	Email: () Phone: ()
4. Bonnie Sukowatey	Bonnie Sukowatey	Street: 6446 Hwy 19 City: Wauwaukee Zip: 53597	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Springfield	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()
5. WAYNE BURMEISTER	Wayne Burmeister	Street: 27 FAIRVIEW TRL City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()
6. Richard Sarabia	Richard Sarabia	Street: 300 W. Second St City: Wauwaukee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()
7. Roberta Ward	Roberta Ward	Street: 315 Grant St. City: Wauwaukee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)	Email: RAN Phone: (608)
8. Amy J Peterson	Amy J. Peterson	Street: 5564 Shannon Way City: Wauwaukee Zip: 53597	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Westport	11/15/2011 (Month) (Day) (Year)	Email: (608) Phone: (608)
9. Kathleen M. Tessmer	Kathleen M. Tessmer	Street: 7808 Courtyard Dr City: Madison WI Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email: Kt es Phone: ()
10. Susan Eastwood	Susan Eastwood	Street: 938 Kensington Way City: Zip:	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()

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Ronald Wolfe
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SCOTT WALKER RECALL PETITION

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1. Barbara Newell	<i>Barbara Newell</i>	Street: 7252 Laki - Springfield Rd City: Laki Zip: 53555	<input checked="" type="checkbox"/> Town Dane <input type="checkbox"/> Village <input type="checkbox"/> City	11 / 15 / 20 11 (Month) (Day) (Year)
2. Marierose Moran	<i>Marierose Moran</i>	Street: 305 W. 3rd St City: Waunakee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waunakee <input type="checkbox"/> City	11 / 15 / 20 11 (Month) (Day) (Year)
3. Lesa Schaefer	<i>Lesa Schaefer</i>	Street: 201 W Second St City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waunakee <input type="checkbox"/> City	11 / 15 / 20 11 (Month) (Day) (Year)
4. Terri L. Kuites	<i>Terri L. Kuites</i>	Street: 6732 Hwy Hwy I City: Waunakee WI Zip: 53597	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Vienna	11 / 15 / 20 11 (Month) (Day) (Year)
5. Heather Stertz	<i>Heather Stertz</i>	Street: 4612 Camden Rd City: Madison Zip: 53716	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11 / 15 / 20 11 (Month) (Day) (Year)
6. Rebecca Donai	<i>Rebecca Donai</i>	Street: 1228 Hanover Tr City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waunakee <input type="checkbox"/> City	11 / 15 / 20 11 (Month) (Day) (Year)
7. Kenneth D Hohlstein	<i>Kenneth D Hohlstein</i>	Street: 205 Belmonte Rd City: ARlington Zip: 53911	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City ARlington	11 / 15 / 20 11 (Month) (Day) (Year)
8. SHAWN LYNCH	<i>SHAWN LYNCH</i>	Street: 1530 EAST ST. City: BLACK DARTH Zip: 53515	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BLACK DARTH	11 / 15 / 20 11 (Month) (Day) (Year)
9. Connie Burmeister	<i>Connie Burmeister</i>	Street: 27 Fairview Trail City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waunakee <input type="checkbox"/> City	11 / 15 / 20 11 (Month) (Day) (Year)
10. Mary Jo Pauls	<i>Mary Jo Pauls</i>	Street: 801 Troon Ct City: Waunakee, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waunakee <input type="checkbox"/> City	11 / 15 / 20 11 (Month) (Day) (Year)

Certification of Circulator

I, Ronald Wolfe, (certify): I reside at 5601 D24me. Dr Town of Springfield
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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SCOTT WALKER RECALL PETITION

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1. <i>Michelle Balistreri</i>	<i>[Signature]</i>	Street: <i>1217 Sausbilit Dr</i> City: <i>Wauwatosa WI</i> Zip: <i></i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Wauwatosa</i>	<i>11/15/2011</i> (Month) (Day) (Year)	Email: <i>[Signature]</i> Phone: <i>(608) [Signature]</i>
2. MELANIE MCCALMONT	<i>[Signature]</i>	Street: <i>212 6th St</i> City: <i>Wauwatosa WI</i> Zip: <i>53597</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Wauwatosa</i>	<i>11/15/2011</i> (Month) (Day) (Year)	Email: <i></i> Phone: <i>() ()</i>
3. PAUL HECZKO	<i>[Signature]</i>	Street: <i>805 PRESIDIO DR</i> City: <i>WAUNAKEE</i> Zip: <i>53597</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>WAUNAKEE</i>	<i>11/15/2011</i> (Month) (Day) (Year)	Email: <i></i> Phone: <i>() ()</i>
4. Joseph Zitzelsberger	<i>[Signature]</i>	Street: <i>923 Countryside Xing</i> City: <i>WAUNAKEE</i> Zip: <i>53597</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>WAUNAKEE</i>	<i>11/15/2011</i> (Month) (Day) (Year)	Email: <i></i> Phone: <i>() ()</i>
5. Therese Datto	<i>[Signature]</i>	Street: <i>806 Elizabeth St.</i> City: <i>Wauwatosa WI</i> Zip: <i>53597</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>Wauwatosa</i>	<i>11/15/2011</i> (Month) (Day) (Year)	Email: <i>SFWBR</i> Phone: <i>(608) [Signature]</i>
6. Ron Endres	<i>[Signature]</i>	Street: <i>5657 Dahmen Dr.</i> City: <i>Wauwatosa</i> Zip: <i>53597</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Springfield</i>	<i>11/15/2011</i> (Month) (Day) (Year)	Email: <i></i> Phone: <i>(608) [Signature]</i>
7. Betty Hawlik	<i>[Signature]</i>	Street: <i>6696 Viaduct Rd</i> City: <i>Dane, WI</i> Zip: <i>53529</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>Dane</i>	<i>11/15/2011</i> (Month) (Day) (Year)	Email: <i></i> Phone: <i>() ()</i>
8. Barbara Habich	<i>[Signature]</i>	Street: <i>1609 Washington Ave</i> City: <i>SAUK CITY WI</i> Zip: <i>53583</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>SAUK CITY</i>	<i>11/15/2011</i> (Month) (Day) (Year)	Email: <i>barbara</i> Phone: <i>(608) [Signature]</i>
9. Kathy Mast	<i>[Signature]</i>	Street: <i>16539 W Acorn Ridge</i> City: <i>HAYWARD, WI</i> Zip: <i>54843</i>	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <i>HAYWARD</i>	<i>11/15/2011</i> (Month) (Day) (Year)	Email: <i></i> Phone: <i>() ()</i>
10. VINCENT SCHAAF	<i>[Signature]</i>	Street: <i>109 W. 3RD, ST</i> City: <i>WAUNAKEE, WI</i> Zip: <i>53597</i>	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City <i>WAUNAKEE</i>	<i>11/15/2011</i> (Month) (Day) (Year)	Email: <i></i> Phone: <i>() ()</i>

Certification of Circulator

I, Ronald Wolfe, (certify): I reside at 5601 Dahmen Dr (Circulator's Residence - Street name and Number) Town of Springfield (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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Ronald Wolfe
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

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1. Lily J. Viksjo	<i>Lily J. Viksjo</i>	Street: 207 Short St. City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)	Email Phone
2. Julie Scheuer	<i>Julie A</i>	Street: 617 Worthington Way City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)	Email Phone
3. Danielle Herr	<i>Danielle Herr</i>	Street: 303 Raymond Rd City: Waunakee, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)	Email Phone
4. Anne Dexter	<i>Anne Dexter</i>	Street: 301 Knight St City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)	Email Phone
5. John Phillips	<i>John Phillips</i>	Street: 312 Prospect Rd City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)	Email Phone
6. Ron Wolfe	<i>Ronald Wolfe</i>	Street: 5601 Dahmen Dr City: Waunakee WI Zip: 53597	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Springfield	11/15/2011 (Month) (Day) (Year)	Email Phone
7. Melinda Nelson	<i>Melinda J Nelson</i>	Street: 112 Winston Way City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)	Email Phone
8. Mousey S. Miller	<i>Mousey S. Miller</i>	Street: 203 West 3rd Street City: WAUNAKEE Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)	Email Phone
9. Bernard E. Long	<i>Bernard E. Long</i>	Street: 208 4th St City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)	Email Phone
10. Angie Ward	<i>Angela M Ward</i>	Street: 817 Henry St City: Waunakee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)	Email Phone

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Ronald Wolfe
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

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1. Jeri Lawrenz	<i>Jeri Lawrenz</i>	Street: 7200 Black Hill Rd City: Lodi WI Zip: 53555	<input checked="" type="checkbox"/> Town Dane <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
2. Annette Falk	<i>Annette Falk</i>	Street: 319 8th Ave City: Baraboo, WI Zip: 53913	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Baraboo	11/15/2011 (Month) (Day) (Year)
3. Dorothy Gosdeck	<i>Dorothy Gosdeck</i>	Street: 810 Centennial Pkwy City: Wauwabea Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwabea	11/15/2011 (Month) (Day) (Year)
4. Cynthia S. Turner	<i>Cynthia S. Turner</i>	Street: 1700 Dover Dr City: Wauwabea WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwabea	11/15/2011 (Month) (Day) (Year)
5. Ashley Morton	<i>Ashley Morton</i>	Street: 242 Sleepy Hollow Rd. City: Fall River, WI Zip: 53932	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Fall River	11/15/2011 (Month) (Day) (Year)
6. David McDonald	<i>David McDonald</i>	Street: 810 Mack Ln City: DeForest WI Zip: 53532	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City DeForest	11/15/2011 (Month) (Day) (Year)
7. Barbara A. Gher-Henderson	<i>Barbara A. Gher-Henderson</i>	Street: 1014 S. Holiday Drive City: Wauwabea Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwabea	11/15/2011 (Month) (Day) (Year)
8. Heidi Hollenberger	<i>Heidi Hollenberger</i>	Street: 995 Baneberry Dr. City: Sun Prairie Zip: 53590	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Sun Prairie	11/15/2011 (Month) (Day) (Year)
9. James T. Bean III	<i>James T. Bean III</i>	Street: 6036 Hagen Hill Cir City: Madison Zip: 53718	<input checked="" type="checkbox"/> Town Burke <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
10. Scott Boruff	<i>Scott Boruff</i>	Street: 1000 MONTEREY LN City: WAUNAKEE Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)

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(Month) (Day) (Year)

Ronald Wolfe
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. Joyce Loomis	<i>Joyce Loomis</i>	Street: 610 5th St. City: Wauwaukee, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)
2. Ross Tennent	<i>Ross Tennent</i>	Street: 112 W. 3rd St. City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)
3. Glenda Whittaker	<i>Glenda Whittaker</i>	Street: 200 S. Division City: Wauwaukee, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)
4. Dakota W. Veerhusen	<i>D.W.</i>	Street: 200 W. 2nd St. #2 City: Wauwaukee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)
5. Calista Holden	<i>Calista Holden</i>	Street: 132 1/2 W Main City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)
6. Jan T. Temple	<i>Jan T. Temple</i>	Street: 818 John St City: Wauwaukee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)
7. Rodney J. Key	<i>Rodney J. Key</i>	Street: 57926 Rung Dr. City: NORTH Freedom Zip: 53951	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Honey Creek	11/15/2011 (Month) (Day) (Year)
8. Robert Zeman	<i>Robert Zeman</i>	Street: 210 O'Malley Zip: 53597 City:	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)
9. Lois ZEMAN	<i>Lois Zeman</i>	Street: 210 O'Malley St City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)
10. Carla Roudebush	<i>Carla Roudebush</i>	Street: 308 Santa Fe Trl City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwaukee	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Ronald Wolfe, (certify): I reside at 5601 Dzhmen Dr Town of Springfield
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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Ronald Wolfe
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SCOTT WALKER RECALL PETITION

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1. Debra L Ruchti	<i>Debra L Ruchti</i>	Street: 809 Centennial Pkwy City: Wauwaukee WI Zip: 53597	<input checked="" type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
2. John Endres	<i>John Endres</i>	Street: 418 Patrick Ave City: Wauwaukee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
3. Henry W Haugley	<i>Henry W Haugley</i>	Street: 1406 Diamond Ct City: Sun Prairie Zip: 53590	<input type="checkbox"/> Town <input type="checkbox"/> Village Sun Prairie <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
4. Jacalyn M Schultz	<i>Jacalyn M Schultz</i>	Street: 5585 Rankin Cir City: Wauwaukee WI Zip: 53597	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village Westport <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
5. Thomas P. Miller	<i>Thomas P. Miller</i>	Street: 5520 Salter Ct City: Wauwaukee Zip: 53597	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village Westport <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
6. BARRY J. Buckwalter	<i>BARRY J. Buckwalter</i>	Street: 200 Simon Crestway City: Wauwaukee, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
7. Pam Frederick	<i>Pam Frederick</i>	Street: 117 Simon Crestway City: Wauwaukee WI Zip: 53597	<input type="checkbox"/> Town <input type="checkbox"/> Village Wauwaukee <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
8. Michael Coughlin	<i>Michael Coughlin</i>	Street: 304 Raymond Road City: Wauwaukee, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
9. Sherri Beyer	<i>Sherri Beyer</i>	Street: 17236 CR K City: Arlington Zip: 53911	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village Lees <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
10. MICHAEL D. ANDERSON	<i>Michael D. Anderson</i>	Street: 5890 WOODLAND DR. City: WAUNAKEE Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village WAUNAKEE <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Ronald Wolfe, (certify): I reside at 5601 Dzhmen Dr Town of Springfield
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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(Month) (Day) (Year)

Ronald Wolfe
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

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1. TRACY MORIARTY	Tracy Moriarty	Street: 1702 Suwannee Cir City: Waunakee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)
2. Kelly Anklam	Kelly Anklam	Street: 6665 Viaduct Road City: DANE Zip: 53529	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City DANE	11/15/2011 (Month) (Day) (Year)
3. Myles Baustad	Myles Baustad	Street: 604 4th St City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)
4. GEORGE ESKINGER	Georg Eskinger	Street: 315 GRAWT City: WAUNAKEE WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)
5. Clint Beckman	Clint Beckman	Street: 1305 WILMINGTON LANE City: WAUNAKEE WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)
6. Linda Dorn	Linda Dorn	Street: 309 Topeka Tr. City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)
7. MICHAEL MCSTERRY	Michael McSterry	Street: 6004 WOODLAND DRIVE City: WAUNAKEE, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)
8. MARILYN J. ANDERSON	Marilyn J. Anderson	Street: 5890 WOODLAND DRIVE City: WAUNAKEE, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)
9. Nila L. Frye	Nila L. Frye	Street: 404 Everleen Ave City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City waunakee	11/15/2011 (Month) (Day) (Year)
10. Linda K Hellenbrand	Linda K Hellenbrand	Street: 811 Presidio Dr. City: Waunakee, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

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Ronald Wolfe
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SCOTT WALKER RECALL PETITION

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1. Steven Robertson	<i>Steven Robertson</i>	Street: 6041 Hogan Rd City: Wauwakese Zip: 53597	<input checked="" type="checkbox"/> Town ^{SR} Westport <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email: SBr... Phone: ()
2. Ryan Endre	<i>Ryan Endre</i>	Street: 801 Centennial Pkwy City: Wauwakese Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwakese	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()
3. Peter Suchomel	<i>Peter Suchomel</i>	Street: 6856 Taylor Rd. City: Sauk City Zip: 53583	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Sauk City	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()
4. WILLIAM HELLENBRAND	<i>William Hellenbrand</i>	Street: 42902 SMOKEY HOLLOW RD City: POYNETTE WI Zip: 53955	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City ARLINGTON	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()
5. Justin T Best	<i>Justin T Best</i>	Street: 230 S. Division St. Apt #12 City: Wauwakese WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwakese	11/15/2011 (Month) (Day) (Year)	Email: Mickey Phone: (608)
6. Lori A. Gallagher	<i>Lori A. Gallagher</i>	Street: 6502 Beech Ct City: Wauwakese WI Zip: 53597	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Vienna	11/15/2011 (Month) (Day) (Year)	Email: gallagher Phone: (608)
7. Emily Mabre	<i>Emily Mabre</i>	Street: 102 Kearney Way, Apt 109 City: Wauwakese Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwakese	11/15/2011 (Month) (Day) (Year)	Email: () Phone: (608)
8. Judith Drooster	<i>Judith Drooster</i>	Street: 703 Lexington Dr City: Wauwakese Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwakese	11/15/2011 (Month) (Day) (Year)	Email: () Phone: (608)
9. BRAD Hoffmaster	<i>Brad Hoffmaster</i>	Street: 1107 Heritage Ct City: WAUNAKEE WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)	Email: () Phone: ()
10. SUE ANN L. HUBANKS	<i>Sue Ann L. Hubanks</i>	Street: 810 West Lexington Pkwy City: DeForest WI Zip: 53532	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City DEFOREST	11/15/2011 (Month) (Day) (Year)	Email: shuba Phone: (608)

Certification of Circulator

I, Ronald Walk, (certify): I reside at 5601 Dahlen Dr Town of Springfield
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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Ronald Walk
(Signature of Circulator)

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1383

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SCOTT WALKER RECALL PETITION

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1. Nate Clifton	[Signature]	Street: 101 West Alvin St. City: Wauwaukee Wis Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
2. Diane Laubenskin	[Signature]	Street: 812 John St. City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
3. Tim Cychosz	[Signature]	Street: 518 Raymond Rd. City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
4. Valarie Storley	[Signature]	Street: 1118 Melby Drive City: Madison Zip: WI 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
5. Tim Brubaker	[Signature]	Street: 312 Grant St City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
6. Carrie Karls	[Signature]	Street: 6841 Hwy 19 City: Wauwaukee Zip: 53597	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Springfield	11/15/2011 (Month) (Day) (Year)	Email Phone
7. Jennifer Gilbert	[Signature]	Street: 1013 Woodward Dr City: Madison WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
8. Chris Neumaier	[Signature]	Street: 306 Eighth St. City: Wauwaukee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
9. David Katusky	[Signature]	Street: 214 Sunset Ln Apt #6 City: Wauwaukee WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone
10. BETTY BARBIAN	[Signature]	Street: 407 E. Main St. City: Wauwaukee Wis Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwaukee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)	Email Phone

Certification of Circulator

I, Ronald Wolfe, (certify): I reside at 5601 Dahmen Dr Town of Springfield
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Gretchen A. Benson	<i>Gretchen A. Benson</i>	Street: 400 O'Malley St #1 City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waunakee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
2. MARIANNE Prusiewicz	<i>Marianne Prusiewicz</i>	Street: 796 Mound St City: BARABOO WI Zip: 53913	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City BARABOO	11/15/2011 (Month) (Day) (Year)
3. Jo Stothard	<i>Jo Stothard</i>	Street: 104 Fourth St City: WAUNAKEE Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waunakee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
4. Royce Lee	<i>Royce Lee</i>	Street: 211 Don Dr City: Waunakee Zip: WI	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waunakee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
5. Sharon A. Schneider	<i>Sharon A. Schneider</i>	Street: 602 Seventh St City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waunakee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
6. Sandra J. Ruskin	<i>Sandra J. Ruskin</i>	Street: 518 Raymond Rd City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waunakee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
7. Robin K. Higgins	<i>Robin K. Higgins</i>	Street: 5281 River Rd City: Waunakee Zip: 53597	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Westport	11/15/2011 (Month) (Day) (Year)
8. Kaitlin Zenger	<i>Kaitlin Zenger</i>	Street: 100 South Division #67 City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waunakee <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
9. STEVEN ZERBER	<i>Steven Zerber</i>	Street: 6464 BRADWOOD TR City: SUN PRAIRIE Zip: 53590	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
10. Joseph R. Ballweg	<i>Joseph R. Ballweg</i>	Street: 59550 Rahi Road City: Prairie du Sac Zip: 53578	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Prairie du Sac <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Ronald Wolfe, (certify): I reside at 5601 Dehmen Dr Town of Springfield
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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Ronald Wolfe
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

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1. Belinda Hightower	Belinda Hightower	Street: 319 E. Varlean Ave City: Waukegan W-I Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Waukegan <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
2. MIKE M. L. WEE	Mike M. L. WEE	Street: 512 RUPERT RD. City: WAUNAKEE Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village WAUNAKEE <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
3. ROBERT MILLER	Robert Miller	Street: 205 SHORT ST. City: WAUNAKEE Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village WAUNAKEE <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
4. Melissa Ziegler	Melissa Ziegler	Street: 101 W. Third St City: WAUNAKEE WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village WAUNAKEE <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
5. Jacqueline Ziegler	Jacqueline Ziegler	Street: 310 Topeka Tr. City: WAUNAKEE WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village WAUNAKEE <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
6. Robert Nielsen	Robert Nielsen	Street: 1006 Bristol Dr 53597 City: WAUNAKEE WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village WAUNAKEE <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
7. Ramona Dunahay	Ramona Dunahay	Street: 453025 Broward Rd 53954 City: PARDONVILLE WI Zip: 53954	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Buffalo	11/15/2011 (Month) (Day) (Year)
8. LeRoy J Dunahay	LeRoy J Dunahay	Street: W3025 Broward Rd City: PARDONVILLE WI Zip: 53954	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Buffalo	11/15/2011 (Month) (Day) (Year)
9. ROSEMARY LEE	Rosemary Lee	Street: 211 Dorn Dr City: WAUNAKEE, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village WAUNAKEE <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
10. Debra Y Meyer	Debra Y Meyer	Street: 301 Raymond Rd City: WAUNAKEE WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village WAUNAKEE <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Ronald Wolfe, (certify): I reside at 5601 Dahmen Dr Town of Springfield
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

NOV 1 15 2011
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Ronald Wolfe
(Signature of Circulator)

Page No. (Official Use Only)
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Circulators, please
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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CON
1. Michael Hylander	<i>Michael Hylander</i>	Street: 3768 Hoefler City: MADISON Zip: 53718	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City TOKAM Creek	11/15/2011 (Month) (Day) (Year)	Email Phone
2. JEFF LOUD	<i>Jeff Loud</i>	Street: 6405 LAKEVIEW BLVD #15 City: MIDDLETON, W Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MIDDLETON	11/15/2011 (Month) (Day) (Year)	Email Phone (608)
3. Rogen Sukowatey	<i>Rogen Sukowatey</i>	Street: 6446 ST. Rd. 19 City: WAUNAKEE, WIS. Zip: 53597	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Springfield	11/15/2011 (Month) (Day) (Year)	Email Phone
4. Diane DiSalvo	<i>Diane DiSalvo</i>	Street: 500 W 3RD City: WAUNAKEE Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)	Email Phone
5. Kristin Meyer	<i>Kristin Meyer</i>	Street: 2526 E. Dayton St City: MADISON WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)	Email Phone Kristin
6. Alyssa Hightower	<i>Alyssa Hightower</i>	Street: 2305 Division St. #16 City: WAUNAKEE WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)	Email Phone Davidan (608)
7. JEFF HENDERSON	<i>Jeff Henderson</i>	Street: 1014 S. HOLIDAY DR City: WAUNAKEE Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)	Email Phone jhen (608)
8. Julie Hubal	<i>Julie Hubal</i>	Street: 405 Badger Lane City: WAUNAKEE Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)	Email Phone jhe (608)
9. Mary Murphy	<i>Mary R. Murphy</i>	Street: 213 Bacon ST City: WAUNAKEE Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City WAUNAKEE	11/15/2011 (Month) (Day) (Year)	Email Phone rom (608)
10. JOHN CA JACOBSEN	<i>John Ca Jacobsen</i>	Street: 5606 Old Middleton Rd City: MADISON WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)	Email Phone

Certification of Circulator

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(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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Ronald Wolfe
(Signature of Circulator)

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Circulators, please

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Barbara Schlutten	<i>Barbara Schlutten</i>	Street: 1030 Gunter Dr City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)
2. Ann Moen	<i>Ann M. Moen</i>	Street: W11097 Deer Run Dr City: LODI WI Zip: 53555	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City LODI	11/15/2011 (Month) (Day) (Year)
3. Debra Christoph	<i>Debra Christoph</i>	Street: 307 Santa Fe Tr 53597 City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)
4. Richard P. Arnold	<i>Richard P. Arnold</i>	Street: 103 Winston Way City: WAUNAKEE, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)
5. Greg Roberts	<i>Greg Roberts</i>	Street: 505 April Lane City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)
6. SHARON HYNES	<i>Sharon Hynes</i>	Street: 7016 Lavina Rd City: Dane Zip: 53529	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Dane	11/15/2011 (Month) (Day) (Year)
7. Jeff Park	<i>Jeff Park</i>	Street: 410 Prairie St City: Prairie du Sac, WI Zip: 53578	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Village of Prairie du Sac	11/15/2011 (Month) (Day) (Year)
8. MARK DERRA	<i>Mark Derra</i>	Street: 200 MELLISSA LN City: COTTAGE GROVE WI Zip: 53527	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City COTTAGE GROVE	11/15/2011 (Month) (Day) (Year)
9. Mike Mintz	<i>Mike Mintz</i>	Street: 1402 Wimbledon Way City: Waunakee, WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)
10. Ronald Blau	<i>Ronald Blau</i>	Street: Hickory Ln 4663 City: DeForest WI Zip: 53532	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City DeForest	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Ronald Wolfe, (certify): I reside at 5601 Dahmen Dr Town of Springfield
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Ronald Wolfe
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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Mary Stutz	<i>Mary Stutz</i>	Street: N1508 Sunset Dr City: Lodi WI Zip: 53555	<input checked="" type="checkbox"/> Town Ship - Lodi <input type="checkbox"/> Village <input type="checkbox"/> City Arlington	11/15/2011 (Month) (Day) (Year)
2. Lynn J Hagen	<i>Lynn J Hagen</i>	Street: 300 W 2nd ST City: Wauwatosa WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwatosa	11/15/2011 (Month) (Day) (Year)
3. Dennis Campfield	<i>Dennis Campfield</i>	Street: 100 Fish St #1 City: Wauwatosa WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwatosa	11/15/2011 (Month) (Day) (Year)
4. Larry Schmitz	<i>Larry Schmitz</i>	Street: 7227 Elmwood Ave. City: Middleton WI Zip: 53522	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)
5. Kurt Stiemke	<i>Kurt Stiemke</i>	Street: 4414 N. Sherman Ave City: Madison WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. Sandra Reed	<i>Sandra Reed</i>	Street: 620 DeForest St City: DeForest WI Zip: 53532	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City DeForest	11/15/2011 (Month) (Day) (Year)
7. Ronald H. Acker	<i>Ronald H. Acker</i>	Street: 104 8th St City: Wauwatosa WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwatosa	11/15/2011 (Month) (Day) (Year)
8. LEON LAWRENZ	<i>Leon Lawrenz</i>	Street: 7202 BLACK HILL RD. City: LODI WI Zip: 53555	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City DANE	11/15/2011 (Month) (Day) (Year)
9. Trista Bickel	<i>Trista Bickel</i>	Street: 1117 Aspen place City: Sun Prairie WI Zip: 53590	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Sun Prairie	11/15/2011 (Month) (Day) (Year)
10. LORI Roberts	<i>Lori Roberts</i>	Street: 505 April Lane City: Wauwatosa WI Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City Wauwatosa	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, Ronald Wolfe, (certify): I reside at 5601 Dahmen Dr Town of Springfield
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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Ronald Wolfe
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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Paul Schwagerer		Street: 5481 Lacy Rd. City: Fitchburg Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)	Email: _____ Phone: () _____
2. Heather Marley		Street: 733 Copeland St. City: Madison Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email: _____ Phone: () _____
3. James W Lodholz		Street: 2654 Pennwall Cir City: Fitchburg WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)	Email: _____ Phone: () _____
4. Christina Hatch		Street: 2618 Pennington Cir City: Fitchburg WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)	Email: _____ Phone: () _____
5. AMY RADSPINNER		Street: 102 N. RORY RD City: MADISON WI Zip: 53726	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)	Email: _____ Phone: () _____
6. James Meyer		Street: 2634 Pennwall Cir City: Fitchburg Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)	Email: _____ Phone: () _____
7.		Street: _____ City: _____ Zip: _____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20____ (Month) (Day) (Year)	Email: _____ Phone: () _____
8.		Street: _____ City: _____ Zip: _____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20____ (Month) (Day) (Year)	Email: _____ Phone: () _____
9.		Street: _____ City: _____ Zip: _____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20____ (Month) (Day) (Year)	Email: _____ Phone: () _____
10.		Street: _____ City: _____ Zip: _____	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20____ (Month) (Day) (Year)	Email: _____ Phone: () _____

Certification of Circulator

I, Nancy Horns, (certify): I reside at 2642 Pennwall Cir City of Fitchburg
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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Circulators, please

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SCOTT WALKER RECALL PETITION

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1. Elene Fareed	<i>Elene Fareed</i>	Street: 333 Village Green City: madison, WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Marc Rodriguez	<i>Marc Rodriguez</i>	Street: 7460 Old Sack Road City: madison Zip: WI 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. Tom Annen	<i>Thomas Annen</i>	Street: 1310 Mound st City: Madison WI Zip: 53715	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. Trevor Wiggins	<i>Trevor Wiggins</i>	Street: 799 SWALLOW TAIL City: OREGON Zip: 53575	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City OREGON	11/15/2011 (Month) (Day) (Year)
5. Molly Wiggins	<i>Molly Wiggins</i>	Street: 749 Swallowtail Drive City: Oregon WI Zip: 53575	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Oregon	11/15/2011 (Month) (Day) (Year)
6. JUSTIN BLAZEL	<i>Justin Blazel</i>	Street: 985 N. Gammon #8 City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
7. Paige Mika	<i>Paige Mika</i>	Street: 1014 Juniper St City: Sun Prairie Zip: 53570	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Sun Prairie	11/15/2011 (Month) (Day) (Year)
8. Rachel Klevar	<i>Rachel Klevar</i>	Street: 421 N. Franklin Ave. City: madison, WI Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City madison	11/15/2011 (Month) (Day) (Year)
9. Opal Tomashaska	<i>Opal</i>	Street: 1902 Brittany Pl 53711 City: Madison Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON gm	11/15/2011 (Month) (Day) (Year)
10. Peggy A. Kostroski	<i>Peggy A Kostroski</i>	Street: 5401 Big Bow Rd City: Fitchburg WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, John Murphy, (certify): I reside at 901 Pebble Beach Dr City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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John Murphy
(Signature of Circulator)

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Circulators

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SCOTT WALKER RECALL PETITION

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1. Dawn Lussier	<i>[Signature]</i>	Street: 3433 Leflore Ct. City: Verona Zip: WI	<input checked="" type="checkbox"/> Town Middleton <input type="checkbox"/> Village <input type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
2. Amy Pophal	<i>[Signature]</i>	Street: 715 Cricket Lane #2 City: Middleton WI Zip: 53562	<input type="checkbox"/> Town Middleton <input type="checkbox"/> Village <input checked="" type="checkbox"/> City	11/15/2011 (Month) (Day) (Year)
3. Cynthia Koshalek	<i>[Signature]</i>	Street: 551 Hickory Ct City: Verona WI Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Verona	11/15/2011 (Month) (Day) (Year)
4. Edward Schwinn	<i>[Signature]</i>	Street: 65 Wood Brook Way City: Fitchburg WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)
5. Thomas Cox	<i>[Signature]</i>	Street: 25 Morningdale City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
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7.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
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9.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)
10.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)

Certification of Circulator

I, John Murphy, (certify): I reside at 901 Pebble Beach Dr City of Madison
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

[Signature]
(Signature of Circulator)

Page No. (Official Use Only)
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Circulators

Phone

Email

SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. DEVON H. CNASTAN	<i>Devon H. Cnastan</i>	Street: 3238 Clove Dr City: Madison Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
2. Joseph M. Murphy	<i>Joseph M. Murphy</i>	Street: 821 N. High Point Rd. City: Madison, WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
3. J Gausmann Audrey	<i>Audrey J Gausmann</i>	Street: 6840 Schroeder Rd #9 City: Madison Wis. Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
4. Cynthia Fine	<i>Cynthia Fine</i>	Street: 6821 Walden Way City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
5. Timothy Moon	<i>Timothy Moon</i>	Street: 7221 Watts Rd #8 City: Madison WI Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
6. Angela Boehnen	<i>Angela Boehnen</i>	Street: 3420 Sugar Maple Ln City: Verona, WI Zip: 53593	<input checked="" type="checkbox"/> Town MIDDLETON <input type="checkbox"/> Village <input type="checkbox"/> City VERONA EM 11/15/2011	11/15/2011 (Month) (Day) (Year)
7. Elisabeth Hyng	<i>Elisabeth Hyng</i>	Street: 921 N. Westfield Rd City: Madison WI Zip: 53717	<input checked="" type="checkbox"/> Town EM 11/15/2011 <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
8. Linda Franklin	<i>Linda Franklin</i>	Street: 1429 Fisher St City: Madison Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
9. David Rasmussen	<i>David Rasmussen</i>	Street: 2310 Chalet Gardens Rd, Apt #5 City: Fitchburg, WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Fitchburg	11/15/2011 (Month) (Day) (Year)
10. CAROL RENEAU	<i>Carol Reneau</i>	Street: 28 QUAIL RIDGE DR City: MADISON Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, ELAINE E. MURPHY, (certify): I reside at 901 PEBBLE BEACH DR MADISON, WI 53717
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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Elaine E. Murphy
(Signature of Circulator)

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Circulators

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING
1. STEPHEN DRAKE	<i>Stephen Drake</i>	Street: 21 SAYNER CT. #25 City: MADISON, WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
2. DOMINIQUE TAQUET	<i>D. Taquet</i>	Street: 66 PONWOOD CIR #F City: MADISON WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
3. Kim Flynn	<i>Kim Flynn</i>	Street: 7865 Wood Road Dr. City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
4. Danielle Paulton	<i>Danielle Paulton</i>	Street: 234 Randolph #114 City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
5. Yaoping Zhang	<i>Yaoping Zhang</i>	Street: 402 Augusta Dr. City: Madison Zip: W253717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/14/2011 (Month) (Day) (Year)
6. Anna Jaskiewicz	<i>Anna Jaskiewicz</i>	Street: 5513 marsha dr. City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City madison	11/15/2011 (Month) (Day) (Year)
7. Margaret Jenks	<i>M. Jenks</i>	Street: 2510 McKenna Blvd City: Madison WI Zip: 53711	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
8. Lisa Linfield	<i>Lisa Linfield</i>	Street: 7009 Harvest Hill Rd. City: Madison WI Zip: 53717	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. David Prochaska	<i>David L. Prochaska</i>	Street: 9 Naylor circle City: Madison, WI Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City madison	11/15/2011 (Month) (Day) (Year)
10. JUDITH A. TAYLOR	<i>Judith A Taylor</i>	Street: 5632 Lake Mendota Dr. City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, ELAINE E. MURPHY, (certify): I reside at 901 PEBBLE BEACH DR CITY OF MADISON WI 53717
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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Elaine E. Murphy
(Signature of Circulator)

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Circulators

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by:
Committee
PO Box 25
Madison, WI

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTACT INFORMATION
1. Print: <u>Permell Lee DeSpain</u> Sign: <u>Bermella Lee DeSpain</u>	Street: <u>3 Red Oak Trail</u> City: <u>Madison WI</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>cdes</u> Phone: <u>(608)</u>
2. Print: <u>CLARENCE S. DESPAIN</u> Sign: <u>[Signature]</u>	Street: <u>3 RED OAK TRAIL</u> City: <u>MADISON WI</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>MADISON</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>CDES</u> Phone: <u>(608)</u>
3. Print: <u>CAROL PRUGH</u> Sign: <u>[Signature]</u>	Street: <u>5 Red Oak Tr.</u> City: <u>Madison WI</u> Zip: <u>53717</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>cpr</u> Phone: <u>(608)</u>
4. Print: <u>Robert I Prugh</u> Sign: <u>[Signature]</u>	Street: <u>5 Red OAK tr.</u> City: <u>MADISON WI</u> Zip: <u>53712</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>MADISON</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>rprugh</u> Phone: <u>(608)</u>
5. Print: <u>Adam Prugh</u> Sign: <u>[Signature]</u>	Street: <u>4310 Lumley Rd. #1</u> City: <u>Madison WI</u> Zip: <u>53711</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City <u>Madison</u> (Municipality Name)	<u>11/15/2011</u> (Month) (Day) (Year)	Email: <u>adam</u> Phone: <u>(608)</u>

I, Robert I Prugh (Printed Name of Circulator) certify: I reside at 5 RED OAK TR. (Circulator's Residence - Street Name and Number) City of MADISON (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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(Signature of Circulator)

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Circulators.

Please include your:

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. MARY BRUSEWITZ	<i>Mary Brusewitz</i>	Street: 401 MELODY LANE • UNIT C City: VERONA Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City VERONA	11 / 15 / 2011 (Month) (Day) (Year)	Email Phone
2. PATRICIA NOLEN	<i>Pat Nolen</i>	Street: 106 RICHARD CIR City: VERONA Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City VERONA	11 / 15 / 2011 (Month) (Day) (Year)	Email Phone
3. TERRY NOLEN	<i>Terry Nolen</i>	Street: 106 RICHARD CIRCLE City: VERONA Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City VERONA	11 / 15 / 2011 (Month) (Day) (Year)	Email Phone
4. Jeffrey Haak	<i>Jeffrey T. Haak</i>	Street: 15918 W. Croft Rd. City: Evansville Zip: 53536	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Union	11 / 15 / 2011 (Month) (Day) (Year)	Email Phone
5. June Stenner	<i>June Stenner</i>	Street: 405 Rita Ave City: Verona WI Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Verona	11 / 15 / 2011 (Month) (Day) (Year)	Email Phone
6. Michelle Haak	<i>Michelle Haak</i>	Street: 15918 W. Croft Rd City: Evansville Zip: 53536	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Union	11 / 15 / 2011 (Month) (Day) (Year)	Email Phone
7.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone
8.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone
9.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone
10.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone

Certification of Circulator

I, David L. Winslow, (certify): I reside at 205 Jenna Drive City of Verona
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

David L. Winslow
(Signature of Circulator)

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Circulators

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Katie Udelhoven	<i>Katie Udelhoven</i>	834 Jupiter Dr City: Madison Zip: 53718	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
2. Sherree Krong	<i>Sherree Krong</i>	1125 Almta Ct. Apt 4 City: Madison 1 Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. Gemila Matthews	<i>Gemila Matthews</i>	213 Tall Grass Trail City: Sun Prairie Zip: 53590	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Sun Prairie	11/15/2011 (Month) (Day) (Year)
4. Greg Hamilton	<i>Gregory Hamilton</i>	603 7th Street City: Waunakee Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input checked="" type="checkbox"/> City Waunakee	11/15/2011 (Month) (Day) (Year)
5. Dorran Swenson	<i>Dorran Swenson</i>	1310 Tompkins Dr. Apt 7 City: Madison WI Zip: 53716	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
6. Tyler Yarbrough	<i>Tyler Yarbrough</i>	1051 Rd 3025 City: Madison Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
7. MARK ROBERTS	<i>Mark Roberts</i>	8315 FLAGSTONE DR # 201 City: MADISON Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)
8. Amanda Schwantes	<i>Amanda Schwantes</i>	3914 Jenna Drive City: Madison Zip: AS 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
9. Andrew Anderson	<i>Andrew Anderson</i>	2135 Muir Field Rd Apt 6 City: Madison Zip: 53719	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
10. KATHRYN BUHRANDT	<i>Kathryn Buhrandt</i>	3317 WESTVIEW LANE City: MADISON Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City MADISON	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

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(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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David L. Winslow
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. MITCHELL D. COHEN	<i>Mitchell D. Cohen</i>	Street: 7580 VALLEY VIEW CT. City: VERONA Zip: 53593	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City MIDDLETON	11/15/2011 (Month) (Day) (Year)
2. Sarah Clarkson	<i>Sarah Clarkson</i>	Street: 909 Spaight St. #1 City: Madison Zip: 53703	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
3. WILLIAM A. NIEDERBERGER	<i>William A. Niederberger</i>	Street: 6384 DeMarco Tr. City: VERONA Zip: 53593	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Verona	11/15/2011 (Month) (Day) (Year)
4. BRANT D. ABRAHAM	<i>Brant D. Abraham</i>	Street: 228 Meadowside Dr. City: Verona Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Verona	11/15/2011 (Month) (Day) (Year)
5. VICTORIA JK DUNN	<i>Victoria J. Dunn</i>	Street: 501 Basswood Ave. City: VERONA Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City VERONA	11/15/2011 (Month) (Day) (Year)
6. WILLIAM L. NEWHOUSE	<i>William L. Newhouse</i>	Street: 1029 Tamarack Way City: Verona, WI Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Verona	11/15/2011 (Month) (Day) (Year)
7. Deborah Vaughan	<i>Deborah Vaughan</i>	Street: 204 N. MAIN ST. City: Verona WI Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Verona	11/15/2011 (Month) (Day) (Year)
8. Gregory Burnard	<i>Gregory Burnard</i>	Street: 102 Prairie Hgts Dr. City: Verona Zip: 53593	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Verona	11/15/2011 (Month) (Day) (Year)
9. Matt Garrison	<i>Matt Garrison</i>	Street: 9324 Old Sank Rd City: Middleton Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)
10. Robert Garrison	<i>Robert Garrison</i>	Street: 3656 Sequoia Tr City: Verona Zip: 53593	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Middleton	11/15/2011 (Month) (Day) (Year)

Certification of Circulator

I, David L. Winslow, (certify): I reside at 205 Jenna Dr. City of Verona
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

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David L. Winslow
(Signature of Circulator)

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. FABRICE NGANDO		Street: 1610 Mayfair Ave. Apt 17 City: Madison Zip: 53714	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11 / 15 / 2011 (Month) (Day) (Year)
2. Joe Humphrey		Street: 7016 Galtfoot Rd City: Cross Plains Zip: 53528	<input checked="" type="checkbox"/> Town Pine bluff <input type="checkbox"/> Village <input type="checkbox"/> City	11 / 15 / 2011 (Month) (Day) (Year)
3. Corey Roubush		Street: 308 Santa Fe Trail City: Wauwatosa Zip: 53597	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village Wauwatosa <input type="checkbox"/> City	11 / 15 / 2011 (Month) (Day) (Year)
4. Megan Daluz		Street: 1122 Fordem Ave #104 City: Madison WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11 / 15 / 2011 (Month) (Day) (Year)
5. Kelsey Rolling		Street: 4828 Anniversary Ln City: Madison WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11 / 15 / 2011 (Month) (Day) (Year)
6. Nichole Uchytel		Street: 3030 Pally Ln #5 City: Middleton WI Zip: 53562	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Middleton	11 / 15 / 2011 (Month) (Day) (Year)
7. Sean Knight		Street: 831 E. Woodland Trail City: Prairie Du Sac Zip: 53578	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Prairie Du Sac	11 / 15 / 2011 (Month) (Day) (Year)
8. Elizabeth Martinez		Street: 2390 Schultz Tr City: Portage WI Zip: 53901	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Portage	11 / 15 / 2011 (Month) (Day) (Year)
9. Lauren Piek		Street: N5719 Indianhead Dr City: Johnson Creek Zip: 53038	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Aztalan	11 / 15 / 2011 (Month) (Day) (Year)
10. Stephanie Koteles		Street: 1942 Melrose St City: Madison WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11 / 15 / 2011 (Month) (Day) (Year)

Certification of Circulator

I, David L. Winslow

(Name of Circulator)

(certify): I reside at

205 Jenna Dr. dlv

(Circulator's Residence - Street name and Number)

City of Verona

(Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

David L. Winslow
(Signature of Circulator)

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Circulators, p

Phone

Email

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SCOTT WALKER RECALL PETITION

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.

PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CON
1. Courtney Gale	<i>Courtney Gale</i>	Street: 5713 Forsythia Pl City: Madison Zip: 53705	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
2. George Hare	<i>George Hare</i>	Street: 2118 E MARLIN ST City: Madison, WI Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
3. Joseph Ziebarth	<i>Joe Ziebarth</i>	Street: 105 N. Franklin St. #3 City: Madison Zip: 53703	<input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City Cottage Grove	11/15/2011 (Month) (Day) (Year)	Email Phone
4. Anna Albrecht	<i>Anna Albrecht</i>	Street: 625 Windsor St. City: Sun Prairie, WI Zip: 53590	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Sun Prairie	11/15/2011 (Month) (Day) (Year)	Email Phone
5. Eric Spear	<i>Eric Spear</i>	Street: 6070 HWY J City: BLACK EARTH Zip: 53515	<input type="checkbox"/> Town <input checked="" type="checkbox"/> Village <input type="checkbox"/> City BLACK EARTH	11/15/2011 (Month) (Day) (Year)	Email Phone
6. MARY ADAMSON	<i>Mary Adamson</i>	Street: 2005 PINE DR #8 City: FITCHBURG Zip: 53713	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City FITCHBURG	11/15/2011 (Month) (Day) (Year)	Email Phone
7. MICHAEL BERTRAND	<i>Michael Bertrand</i>	Street: 201 Division St. City: Madison Zip: 53704	<input type="checkbox"/> Town <input type="checkbox"/> Village <input checked="" type="checkbox"/> City Madison	11/15/2011 (Month) (Day) (Year)	Email Phone
8.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone
9.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone
10.		Street: City: Zip:	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	/ / 20 (Month) (Day) (Year)	Email Phone

Certification of Circulator

I, David L. Winslow, (certify): I reside at 205 Jenna Drive City of Verona
(Name of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

11 / 15 / 2011
(Month) (Day) (Year)

David L. Winslow
(Signature of Circulator)

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